providing vaccination to prevent six vaccine preventable diseases *i.e.* Tuberculosis, Diphtheria, Pertussis, Tetanus, Polio, and Measles to all States including Punjab.

(b) Government of Punjab is implementing the immunization programme in the State. Coverage of various antigens as indicated by coverage evaluation survey of 2005 are BCG 93.7%, DPT3 87.5%, OPV3 86.7%, Measles 87.5%.

(c) Yes, sir.

(d) Universal Immunization Programme (UlP) has been taken as one of the thrust areas under National Rural Health Mission (NRHM). Efforts are being made under NRHM to achieve near 100% coverage of all antigens. Monthly Health Day is being organised in every village/ Anganwadi by the States wherein immunization of children is taken up as an important activity. The States have been provided with regular supply of vaccines, AD Syringes, mobility support, support for vaccine delivery to fill up the critical gaps in the programme. Besides monitoring of the programme is also intensified at all levels.

**Spraying of DDT to control diseases**

3133. SHRI TARIQ ANWAR: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether there had been increase in number of cases of Malaria, Kala-azar, T.B., etc. on the country during the years 2004-2005 and 2005-06 particularly in Bihar and Maharashtra;

(b) if so, the details thereof and the reasons therefor;

(c) whether Government have made necessary arrangements for the spray of DDT in rural/urban areas in the country;

(d) if not, *the* reasons therefor and

(e) how much funds have been received from foreign agencies and Government's contribution for this project?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) and (b) The Malaria cases have declined in the country as per reports received from States/UTs including Maharashtra and Bihar. The case of kala-azar have

shown an increase in recent years. The year-wise reported cases of malaria and kala-azar are as below:—

Malaria:

| Country/State | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 (upto June) |
|---|---|---|---|---|---|---|
| Country | 2085484 | 1841220 | 1869403 | 1915363 | 1808217 | 356587 |
| Maharashtra | 56043 | 45568 | 62947 | 68988 | 47632 | 7125 |
| Bihar | 4108 | 3683 | 2652 | 1872 | 2733 | 272 |

Kala-azar:

| Country/State | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 (upto May) |
|---|---|---|---|---|---|---|
| Country | 12239 | 12140 | 18214 | 24479 | 31217 | 13293 |
| Bihar | 10327 | 9684 | 13960 | 17324 | 23383 | 9163 |
| Maharashtra | 0 | 0 | 0 | 0 | 0 | 0* |

*Maharashtra is not endemic for Kala-azar.

More Kala-azar cases have come to light due to enhanced surveillance, door-to-door search of kala-azar cases and regular Kala-azar fornights.

T.B.:

The number of TB cases reported under National TB Control Programme in the country including the States of Bihar & Maharashtra have been more or less static during the last few years.

(c) and (d) Yes Sir. The Govemment has provided DDT to States for Indoor Residual Spray in Malaria high risk rural areas of the country and kala-azar endemic districts.

In Maharashtra, DDT spray is not undertaken as it is not effective and the other insecticides are being sprayed.

In urban areas of the country, the Indoor Residual Spray is not undertaken due to refusal and hence the anti-larval spray is done.

(e) The Government of India provides cash and commodity assistance to states including Maharashtra and Bihar for prevention and control of Vector Borne Diseases including malaria & kala-azar. The assistance

provided to the states of Maharashtra & Bihar and total expenditure on NVBDCP is given below:—

(Rs. in crores)

| Country/State | Expenditure | | Allocation | | |
|---|---|---|---|---|---|
| | 2002-03 | 2003-04 | 2004-05 | 2005-06 | 2006-07 |
| Country | 206.81 | 201 | 216.66 | 260.43 | 371.58 |
| Maharashtra | 9.47 | 4.63 | 5.93 | 8.15 | 15.23 |
| Bihar | 1.98 | 27.89 | 35.01 | 28.83 | 26.33 |

Out of the total budget allocation for the year 2006-07, Rs. 20 crore is for Kala-azar Control Programme. This includes Rs. 15 crores for Kala-azar medicines and DDT and Rs. 5 Crores for cash assistance to meet the operational cost. There is no external funding to this programme.

The Enchanced Malaria Control Project (EMCP) was implemented in 8 high malaria endemic states *viz.* Maharashtra, Andhra Pradesh, Gujarat, Orissa, Madhya Pradesh, Chhattisgarh, Jharkhand and Rajasthan since September, 1997 and has come to close on 31st December, 2005. In addition, the Intensified Malaria Control Project (IMCP) is being implemented with the assistance from Global fund for AIDS, Tuberculosis and Malaria (GFATM) in North Eastern States, selected high risk areas of Orissa, Jharkhand and West Bengal to increase access to rapid diagnosis and treatment through community participation; reduce malaria transmission risk by use of insecticide treated bednets and larvivorous fish; and enchance awareness about malaria control and promote community, NGO and private sector participation.

Out of the BE for 2006-07, the allocation made under GFATM assistance is indicated below:

Allocation as per BE 2006-07 (Rs. in crores)

| | Total Allocation | Cash | Kind |
|---|---|---|---|
| Country | 371.58 | 112.90 | 238.68 |
| GFATM | 69.88 | 16.05 | 52.93 |

**TUBERCULOSIS:**

For the Projects assisted by International agencies, budget provision is provided under the Externally Aided Component (EAC) out of the Government of lndia funds and same are released to the State/District TB Societies. Based on the Expenditure Statements received from the societies, reimbursement is claimed from the donor agencies. The amount reimbursed from these agencies during year 2004-05 and 2005-06 is given as under:—

(Rs. in crores)

| Agency | Year 2004-05 | Year 2005-06 |
|---|---|---|
| World Bank | 88.90 | 139.07 |
| GFATM | 18.01 | 25.00 |
| DFID | 7.53 | 35.00 |
| DANIDA | 1.00 | * |
| USAID | 1.99 | 2.00 |
| GDF | 16.00 | ** |
| GOI | 0.20 | 0.20 |

- DFID—Department for International Development
- DANIDA—Danish International Development Agency
- GFATM—Global Fund for AIDS, TB and Malaria USAID—United States International Development Agency

* GDF—Global Drug Facility

* Project ended in December, 2005.

** Provided commodity assistance upto year 2005.

**Medical insurance**

3134. SHRI MAHENDRA MOHAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that a new medical insurance scheme has been worked out for Government employees and certain other categories